

INVOICE PARAMETERS

Invoice Parameters must be completed for each invoice type

	ice Type		Utility					Pricing N			
	Software	Civic-	-Caselle	elle Non-Submitter: Inte					aid By		
BILLING D	ETAILS										
Please inc	licate whic	h months b	ills are sen	t by placing	the bill co	ount for each i	month	below:			
Jan	Feb	Mar	Apr	May	June	July	Aug		Oct Nov		Dec
4509	4509	4509	4509	4509	4509	4509	4509	4509	4509	4509	4509
Avg Invoice \$ 113.00 Max Invoice \$ Bill Frequency Monthly BPM 4509											
SERVICE F	EES										
Payment Source Description			ı Pa	Payment Method		Minimum Fee (\$) per Transaction		Calculation Type	Fee Amount		
All Payment Sources				Credit/Deb				\$3.50			
All Payment Sources				ACH/EFT		F			\$1.95		
	Kiosk			Payment Me							
IVR Surcharge				Payment Me		Fix		\$0.95			
				PAYN	MENT SO	URCE EXCEPTI	ONS				
MAX PAY	MENT CAP	•									
CC Max 300.00		AC	ACH Max (\$) 125000		00.00	00					
BILLER DE	POSITORY	BANK INFO)								
Note: must include voided business check or bank letter for each unique account											
Routing #						Last 4 Acct #					
NOTES/SI	PECIAL HAI	NDLING									